# CMS NETWORK CARDIAC SUBCOMMITTEE CHARTER

## **PURPOSE**

The CMS Network (CMSN) Cardiac Subcommittee will review, on an annual basis, facility volumes and outcomes data and make recommendations to the CMSN Advisory Council regarding the delivery of cardiac services to children.

## RESPONSIBILITIES

The responsibilities of the members of the CMS Cardiac Subcommittee include:

- Participating in cardiac subcommittee meetings and conference calls;
- Reviewing reports of volume and outcome data from CMS approved cardiac facilities to determine if the established standards for the CMS Cardiac Program are met;
- Making recommendations to the Deputy Secretary for CMS as to approval or disapproval of facilities based on the review of data;
- Recommending standards for personnel and facilities rendering cardiac services for the Children's Medical Services Program;
- Participating in periodic on-site reviews of cardiac facilities;
- Recommending to the Chair of the CMS Physician Review Committee and to the
  Deputy Secretary of CMS the appointment as a CMS-approved pediatric cardiovascular
  physician an individual with outstanding nationally or internationally recognized
  professional credentials who does not meet all the present CMS physician approval
  standards pertaining to board certification; and
- Providing professional counsel to the CMS Advisory Council on all aspects of the CMS cardiac program.

## **MEMBERSHIP**

The subcommittee will represent the CMS approved cardiac facilities and the community component of the CMS Cardiac Program. There will be thirteen members with technical expertise in cardiac medicine. Committee membership is voluntary. The length of committee membership will be for no more than two consecutive four-year terms. Members may be reappointed after being off the subcommittee for at least 2 years. Committee memberships will be on a staggered basis to assure continuity. The attendance standard will be 75% of all meetings in a twelve month period, with representation by either the member or alternate member. If the facility does not achieve this level of participation the facility will receive a letter to determine the interest in changing their representative to an individual who would have a greater commitment to attend the meetings.

The chair of the CMSN Advisory Council will select the subcommittee members. The subcommittee will select a chairperson who will report to the chair of the CMSN Advisory Council. The structure of the committee will consist of:

#### Members:

- One pediatric cardiologist or cardiovascular surgeon representing each CMS approved
   Cardiac Facility
- One pediatrician with special interest in children with heart disease
- Two physicians at large who are either pediatric cardiologists or cardiovascular surgeons

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Non-voting participants:

- The CMS Statewide Cardiac Consultant
- Other participants required to address specific issues

#### ALTERNATE MEMBERS

To provide an opportunity for each facility and community to have knowledgeable representation at each meeting of the Subcommittee, one alternate member may be nominated by each voting member. The chair of the CMSN Advisory Council will select the subcommittee members.

Alternate members must be a CMS approved cardiovascular physician or pediatrician with special training/interest in pediatric cardiology.

The designated alternate will be empowered with voting privileges in the absence of the regular member.

Alternate members will be encouraged to participate in all deliberations of the CMS Cardiac Subcommittee; and each will receive copies of all correspondence and information regarding the Subcommittee from the CMS Central Office so they will be cognizant of the issues to be addressed by the Subcommittee.

Alternates for the Chair and Vice-Chair of the Subcommittee shall assume the voting privileges, but not the leadership roles, in the absence of those members.

## **STRUCTURE**

The subcommittee shall meet at the call of the Subcommittee Chair, at the request of the Advisory Council Chair, at the request of a majority of its membership, or at the call of the Deputy Secretary for CMS. Six subcommittee members shall constitute a quorum. Meetings will be conducted either face-to-face or via audio or video teleconferencing, and will be scheduled by CMS Central Office staff. Associated meeting costs will be borne by the CMS Central Office where allowable in statute and rule.

### **PROCEDURES**

Minutes will be recorded by CMS Central Office staff and distributed to members before each committee meeting. Parliamentary procedures will be followed. Recommendations will be determined by consensus and presented to the chair of the CMSN Advisory Council. Agenda topics for future meetings will be determined at the end of each meeting based on a list of identified issues.

When a vote is taken on the recommendations of an on-site review of an individual pediatric cardiovascular center, the subcommittee representative of that involved center shall be recused from the vote. Furthermore, the subcommittee representative of an individual center that has a programmatic, fiduciary, or academic relationship to the center under discussion for review shall be recused from the vote.